

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSU FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

02746

7590

01/25/2005

WILLIAM H. EILBERG
THREE BALA PLAZA
SUITE 501 WEST
BALA CYNWYD, PA 19004

04/11/2005 HGBREM2 00000065 10682376

01 FC:2501 700.00 OP
02 FC:1504 300.00 OP

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

William H. Eilberg

(Depositor's name)

William H. Eilberg

(Signature)

April 11, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/682,376	10/09/2003	Fraser C. Henderson	325-11	6107

TITLE OF INVENTION: COMPUTER SIMULATION MODEL FOR DETERMINING DAMAGE TO THE HUMAN CENTRAL NERVOUS SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	04/25/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
WALLING, MEAGAN S	2863	702-152000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. William H. Eilberg

2.

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Computational Biodynamics, LLC

Virginia Beach, Virginia

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
☒ Payment by credit card. Form PTO-2038 is attached.
☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

William H. Eilberg

Date April 11, 2005

Typed or printed name

William H. Eilberg

Registration No. 28,009

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



WILLIAM H. EILBERG
ATTORNEY AT LAW
THREE BALA PLAZA, SUITE 501 WEST
BALA CYNWYD, PENNSYLVANIA 19004
215-885-4600 FAX: 215-885-4603
TOLL FREE: 800-908-2323
EMAIL: WHE@EILBERG.COM

PATENTS, TRADEMARKS
AND COPYRIGHTS

April 11, 2005

WWW.EILBERG.COM

Office of Publications
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Re: U.S. Patent Application
Serial No. 10/682,376; filed October 9, 2003
Invention of Fraser C. Henderson et al
Title: COMPUTER SIMULATION MODEL FOR DETERMINING DAMAGE
TO THE HUMAN CENTRAL NERVOUS SYSTEM
File No. 325-11

Dear Sirs:

I am transmitting an Issue Fee Transmittal (Form PTOL-85) and a Credit Card Payment Form (Form PTO-2038), for payment of the issue fee and publication fee for the above application.

This transmission contains three pages, including this cover letter.

Please confirm receipt of this transmission, by sending a fax to me at 215-885-4603.

I hereby certify that this letter, and an Issue Fee Transmittal (Form PTOL-85) and Credit Card Payment Form (Form PTO-2038), in the above-identified application, are being transmitted by facsimile to the United States Patent and Trademark Office, to fax number 703-746-4000, on the date shown above.

William H. Eilberg

William H. Eilberg
Registration No. 28.009
Attorney for Applicants

VIA FAX to 703-746-4000

WHE/st